

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001745

FILED
Jul 28, 2004
Secretary of State**Entity Name:** CENTRAL FLORIDA YMCA CHILDCARE SERVICES, INC.**Current Principal Place of Business:**433 NORTH MILLS AVENUE
ORLANDO, FL 32803**New Principal Place of Business:****Current Mailing Address:**433 NORTH MILLS AVENUE
ORLANDO, FL 32803**New Mailing Address:****FEI Number:** 20-1065407**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SIKES, RONALD W
111 NORTH ORANGE AVE.
SUITE 1200
ORLANDO, FL 32801 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D () Change (X) Addition
Name: BAILES, C E III
Address: 433 NORTH MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803 US**Title:** D () Change (X) Addition
Name: PIERCE, CHARLES
Address: 433 NORTH MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803 US**Title:** D () Change (X) Addition
Name: WARLICK, THOMAS
Address: 433 NORTH MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803 US**Title:** P () Change (X) Addition
Name: FERBER, JAMES W
Address: 433 NORTH MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803 US**Title:** VP () Change (X) Addition
Name: WILCOX, DAN
Address: 433 NORTH MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803 US**Title:** VPST () Change (X) Addition
Name: RUSSELL, MARK A
Address: 433 NORTH MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK A. RUSSELL

VPST

07/28/2004

Electronic Signature of Signing Officer or Director

Date